ATRIAL FIBRILLATION/FLUTTER (≥8 years old) ADMINISTRATIVE ORDER

Initiate immediate supportive care:

O2 to maintain sat ≥94%

Complete primary and secondary survey as indicated Vital Signs (FSBG and temperature as indicated)

Cardiac Monitor

12-lead ECG

Inclusion Criteria:

Symptomatic patients with A-fib/flutter and HR >130

Stable:

Initiate IV NS TKO

- If hypotensive and normal mentation, administer *NS 10ml/kg* bolus
 - Reassess VS and lung sounds after every 500ml infused
 - May repeat as needed for continued hypotension
- Diltiazem 0.25mg/kg IV, (Max 20mg) administer over 2 minutes
 - If no response after 15 minutes, May repeat same dose once

Hold Diltiazem if patient has QRS > 0.12 milliseconds, patient on Beta blockers, or has WPW

Unstable:

Must include:

- HR >150
- *AND* SBP <90,
- <u>AND</u> altered mental status with other signs of hypoperfusion
 - •Synchronized Cardioversion at 120 Joules
 - •If unsuccessful, repeat at 200 Joules

Notification to include:

Atrial Fibrillation/Flutter Administrative Order, unit number, patient age, gender, and ETA to receiving facility.

Advise if patient is unstable.